



Federal Update for January 13 - 17, 2014



COLA 2016 Update ► Restoration Bills Introduced

A cut to military retirement pay in the budget signed 30 DEC by President Barack Obama has already triggered such a backlash that Congress may vote in January to toss it out. Some lawmakers who represent districts with a military presence — and who voted for the overall budget — are vowing to overturn the pension change as soon as the House and the Senate reconvene Friday. Several House and Senate lawmakers in both parties, responding to heavy lobbying from advocates for service members and veterans, already have introduced bills that would restore full cost-of-living increases for military retirees of working age. Reps. Rodney Davis (R-IL) and Michael Fitzpatrick (R-PA) have introduced a bill that would restore the annual cost-of-living adjustment for about 800,000 enlisted troops and officers who retire in their early 40s, then take other jobs outside the military. In the budget passed this month, the COLA for working-age retirees was reduced by 1 percentage point; once the retirees turn 62, they go back to receiving the full increase.

The cut is expected to save the government about \$6 billion over 10 years, and it is set to be phased in over three years. Davis and Fitzpatrick's bill would find the savings instead by asking the Internal Revenue Service to crack down on Americans who file fraudulent claims for child tax credits. "I think we need to make the fix right now," said Davis, whose Illinois district includes many former service members and employees at nearby Scott Air Force Base. At a meet-and-greet with constituents in his district recently, many voters were livid at the pension cut, Davis said. To them and him, he said, the federal government is unfairly breaking a promise it made to service members. "A lot of people joined the military and made huge sacrifices because they were promised a benefit," he said. "To go back on that is wrong."

- Rep. Martha Roby (R-AL) said she is partnering with Fitzpatrick on the legislation. "I believe that this is a fix the Republican conference can rally

around," she said in a statement one day after the budget was approved. "In my opinion, it should be the first item on the docket for 2014."

- Sen. Jeanne Shaheen (D-NH), who is up for reelection next year, has introduced a bill to replace the \$6 billion saved by the COLA cut by instead "eliminating a tax loophole for offshore corporations," a news release from her office said.
- Republican Sens. Kelly Ayotte (R-NH), James Inhofe (R-OK) Lindsey Graham, S.C., and others also have come out against the COLA cut.
- On 23 DEC Reps. Julia Brownley (D-CA) and Ted Poe (R-TX) introduced similar measures that would repeal the provision. "As a member of the House Veterans' Affairs Committee, I believe our servicemembers, veterans, and their families must receive the benefits they have earned and deserve," Brownley said in a statement. "These benefits are owed to them without equivocation. That is why I have introduced legislation to repeal the military retiree COLA reduction."

It is unclear whether either proposal includes cuts to offset the elimination of the COLA savings. Even lawmakers who support the COLA cut agree that the provision should be changed to exempt at least disabled veterans who were forced to retire for medical reasons, as well as survivors. The budget legislation also requires newly hired civilian federal employees to contribute more to their pensions.

[Source: The Washington Post | Lisa Rein | 30 Dec 2013 ++]

Following is a Summary of Veteran Related Legislation Introduced in the House and Senate Since the Last Bulletin Was Published

- H.R.3714: Servicemembers and Veterans Prescription Drug Safety Act of 2013. A bill to provide for a prescription drug take-back program for members of the Armed Forces and veterans, and for other purposes. Sponsor: Rep Cartwright, Matt [PA-17] (introduced 12/12/2013) Cosponsors (5)
- H.R.3725: Veterans Entrepreneurs Act of 2013. A bill to amend the Internal Revenue Code of 1986 to allow credits for the establishment of franchises with veterans. Sponsor: Rep Flores, Bill [TX-17] (introduced 12/12/2013) Cosponsors (7)

- H.R.3775: Military SAVE Act. A bill to amend titles 10 and 38, United States Code, to improve the treatment of members of the Armed Forces and veterans who are victims of military sexual assault. Sponsor: Rep Barr, Andy [KY-6] (introduced 12/16/2013) Cosponsors (None)
- H.R.3787: Repeal Annual COLA Reduction for Military Retirees under 62. A Bill to repeal of annual adjustment of retired pay and retainer pay amounts for retired members of the Armed Forces under age 62, and for other purposes. Sponsor: Rep Lankford, James [OK-5] (introduced 12/19/2013) Cosponsors (None)
- H.R.3788: Repeal Annual COLA Reduction for Military Retirees under 62. A bill to repeal the reductions in military retirement benefits made by the Bipartisan Budget Act of 2013 and to require inclusion of the taxpayer's social security number to claim the refundable portion of the child tax credit. Sponsor: Rep Fitzpatrick, Michael G. [PA-8] (introduced 12/19/2013) Cosponsors (50)
- H.R.3789: Exempt 2016 COLA Reduction for Retired Disabled Vets. A bill to amend title 10, United States Code, to exempt the retired pay of certain disabled veterans from the reduced adjustment of retired pay and retainer pay amounts for retired members of the Armed Forces under age 62, to prevent any adverse impact of the reduced adjustment on annuities under the Survivor Benefit Plan based on retired or retainer pay, and for other purposes. Sponsor: Rep Miller, Jeff [FL-1] (introduced 12/19/2013) Cosponsors (130)
- H.R.3790: Repeal Annual COLA Reduction for Military Retirees under 62. A bill to repeal annual adjustment of retired pay and retainer pay amounts for retired members of the Armed Forces under age 62. Sponsor: Rep Miller, Jeff [FL-1] (introduced 12/19/2013) Cosponsors (95)
- H.R.3792: Repeal Annual COLA Reduction for Military Retirees under 62. A bill to repeal the reduction in the annual percentage increases of retired pay and retainer pay amounts for retired members of the Armed Forces under age 62. Sponsor: Rep Wittman, Robert J. [VA-1] (introduced 12/19/2013) Cosponsors (1)
- H.R.3793: Military Retirement Restoration Act. A bill to restore full military retirement benefits by closing corporate tax loopholes. Sponsor: Rep Maffei, Daniel B. [NY-24] (introduced 12/19/2013) Cosponsors (36)

- H.R.3794: Repeal Annual COLA Reduction for Military Retirees under 62. A bill to repeal the annual adjustment of retired pay and retainer pay amounts for retired members of the Armed Forces under age 62, and for other purposes. Sponsor: Rep Bilirakis, Gus M. [FL-12] (introduced 12/19/2013) Cosponsors (None)
- H.R.3797: Repeal Annual COLA Reduction for Military Retirees under 62. A bill to repeal an annual adjustment of retired pay and retainer pay amounts for retired members of the Armed Forces under age 62, and for other purposes. Sponsor: Rep DesJarlais, Scott [TN-4] (introduced 12/19/2013) Cosponsors (None)
- H.R.3798: Repeal Annual COLA Reduction for Military Retirees under 62. A bill to repeal an annual adjustment of retired pay and retainer pay amounts for retired members of the Armed Forces under age 62, and for other purposes. Sponsor: Rep DesJarlais, Scott [TN-4] (introduced 12/19/2013) Cosponsors (None)
- H.R.3801: Repeal Annual COLA Reduction for Military Retirees under 62. A bill to repeal the reductions in military retirement benefits made by the Bipartisan Budget Act of 2013 and to authorize the United States Postal Service to implement a modified Saturday delivery schedule. Sponsor: Rep Issa, Darrell E. [CA-49] (introduced 12/19/2013) Cosponsors (None)
- S.1827: American Fighter Aces Congressional Gold Medal Act. A bill to award a Congressional Gold Medal to the American Fighter Aces, collectively, in recognition of their heroic military service and defense of our country's freedom throughout the history of aviation warfare. Sponsor: Sen Manchin, Joe, III [WV] (introduced 12/15/2013) Cosponsors (6)
- S.1844: Military Retirement Restoration Act. A bill to restore full military retirement benefits by closing corporate tax loopholes. Sponsor: Sen Shaheen, Jeanne [NH] (introduced 12/17/2013) Cosponsors (20)
- S.1856: Repeal Annual COLA Reduction for Military Retirees under 62. A bill to repeal section 403 of the Bipartisan Budget Act of 2013, relating to an annual adjustment of retired pay for members of the Armed Forces under the age of 62. Sponsor: Sen Pryor, Mark L. [AR] (introduced 12/18/2013) Cosponsors (1)
- S.1869: Repeal Annual COLA Reduction for Military Retirees under 62. A bill to repeal section 403 of the Bipartisan Budget Act of 2013, relating to an annual adjustment of retired pay for members of the Armed Forces under

the age of 62, and to provide an offset. Sponsor: Sen Ayotte, Kelly [NH] (introduced 12/19/2013) Cosponsors (2)

- S.1872: Repeal Annual COLA Reduction for Military Retirees under 62. A bill to provide that the annual adjustment of retired pay for members of the Armed Forces under the age of 62 under the Bipartisan Budget Act of 2013 shall not apply to members retired for disability and to retired pay used to compute certain Survivor Benefit Plan annuities. Sponsor: Sen Pryor, Mark L. [AR] (introduced 12/19/2013) Cosponsors (None)
- S.1880: Exempt 2016 COLA Reduction for Retired Disabled Vets. A bill to provide that the annual adjustment of retired pay for members of the Armed Forces under the age of 62 under the Bipartisan Budget Act of 2013 shall not apply to members retired for disability and to retired pay used to compute certain Survivor Benefit Plan annuities. Sponsor: Sen Murray, Patty [WA] (introduced 12/19/2013) Cosponsors (4)
- S.1892: Establish VA Registry for Canadian Forces Base Gagetown Vets. A bill to direct the Secretary of Veterans Affairs to establish a registry of certain veterans who were stationed at or underwent training at Canadian Forces Base Gagetown, New Brunswick, Canada, and for other purposes. Sponsor: Sen Collins, Susan M. [ME] (introduced 12/20/2013) Cosponsors (1) [Source: <http://www.loc.gov> & <http://www.govtrack.us/congress/bills> 31 Dec 2013 ++]

Veteran Hearing/Mark-up Schedule ► as of 31 Dec 2013

Following is the current schedule of recent and future Congressional hearings and markups pertaining to the veteran community. Congressional hearings are the principal formal method by which committees collect and analyze information in the early stages of legislative policymaking. Hearings usually include oral testimony from witnesses, and questioning of the witnesses by members of Congress. When a U.S. congressional committee meets to put a legislative bill into final form it is referred to as a mark-up. Veterans are encouraged to contact members of these committees prior to the event listed and provide input on what they want their legislator to do at the event.

- February 25, 2013. House Veterans' Affairs Committee (Chairman Miller, R-Fla.) will hold a hearing to receive a legislative presentation of the Disabled American Veterans.
- March 5, 2013. House Veterans' Affairs Committee (Chairman Miller, R-Fla.) and Senate Veterans' Affairs Committee (Chairman Sanders, I-Vt.) will hold a joint hearing to receive the legislative presentation of Veterans of Foreign Wars.
- March 6, 2014. House Veterans' Affairs Committee and Senate Veterans Affairs Committee will hold a joint hearing to receive the legislative presentations of Veterans Organizations. [Source: Veterans Corner w/Michael Isam 31Dec 2013 ++]

POW/MIA Update ► Identified 16 thru 31 Dec 2013

"Keeping the Promise", "Fulfill their Trust" and "No one left behind" are several of many mottos that refer to the efforts of the Department of Defense to recover those who became missing while serving our nation. The number of Americans who remain missing from conflicts in this century are: World War II (73,000+), Korean War (7,898+), Cold War (126), Vietnam War (1,644), 1991 Gulf War (0), and OEF/OIF (6). Over 600 Defense Department men and women -- both military and civilian -- work in organizations around the world as part of DoD's personnel recovery and personnel accounting communities. They are all dedicated to the single mission of finding and bringing our missing personnel home. For a listing of all personnel accounted for since 2007 refer to http://www.dtic.mil/dpmo/accounted_for.

For additional information on the Defense Department's mission to account for missing Americans, visit the Department of Defense POW/Missing Personnel Office (DPMO) web site at <http://www.dtic.mil/dpmo> or call or call (703) 699-1169. The remains of the following MIA/POW's have been recovered, identified, and scheduled for burial since the publication of the last RAO Bulletin:

Vietnam

None

Korea

- The DPMO announced Cpl. Joe W. Howard, U.S. Army, Battery A, 503rd Field Artillery, 2nd Infantry Division was accounted for Dec. 5, 2013. Howard was lost Dec. 1, 1950, in North Korea. He will be buried with full military honors in Jacksonville, Fla., on Jan. 9, 2014.
- The DPMO announced Cpl. Cletus R. Lies, U.S. Army, Medical Company, 32nd Infantry Regiment, 7th Infantry Division, was accounted for Dec. 7, 2013. Lies was lost Nov. 28, 1950, in North Korea. He will be buried with full military honors in Bremen, N.D., in the spring of 2014.
- The DPMO announced 17 DEC that the remains a of U.S. servicemen, missing from the Korean War, have been identified and will be returned to his family for burial with full military honors. Army Cpl. William A. Newton, 22, of Sikeston, Mo., will be buried Dec. 20, in Sour Lake, Texas. On Nov. 30, 1950, Newton was with the Headquarters Service Company, 2nd Engineer Combat Battalion, 2nd Infantry Division. After a battle with enemy forces, Newton was reported missing in action, near Kunnu-ri, North Korea. Following the war, returning U.S. service members reported that Newton had been captured by the Chinese and died in February 1951 while held captive in prisoner of war Camp 5 near Pyoktong, North Korea. During Operation Glory in September 1954, United Nations and Chinese forces exchanged the remains of war dead, some of which were reportedly recovered from POW Camp 5 at Pyoktong. A military review board declared the remains as unidentifiable in December 1955 and had the remains transferred to Hawaii to be buried as unknown in the National Memorial Cemetery of the Pacific, known as the "Punchbowl." Due to advances in technology, scientists from the Joint POW/MIA Accounting Command (JPAC) in 2012 determined there was a possibility of identifying the remains. After extensive historical and other research, the unknown remains were disinterred for analysis and possible identification. To identify Newton's remains, scientists from JPAC and the Armed Forces DNA Identification Laboratory (AFDIL) used circumstantial evidence and forensic identification tools, such as dental comparison and radiograph comparisons, which matched Newton's X-rays taken in 1946.
- The DPMO announced 23DEC that the remains a of U.S. servicemen, missing from the Korean War, have been identified and will be returned to his family for burial with full military honors. Army Sgt. 1st Class Joseph E. Gantt, 26, of Los Angeles, will be buried Dec. 28, 2013, in Inglewood, Calif.

In late 1950, Gantt was a member of the 503rd Field Artillery Battalion, 2nd Infantry Division, 31st Regimental Combat Team. After engaging in a battle with enemy forces east of the Chosin Reservoir, members of the 31st RCT, historically known as Task Force Faith, began a fighting withdrawal to a more defensible position. Following the battle, Gantt was reported missing Nov. 30, 1950, in the vicinity of Somindong, North Korea. In 1953, a returning American soldier who had been held as a prisoner of war reported that Gantt had been captured by Chinese forces on Nov. 30, 1950, and died of malnutrition in March or April 1951, in prisoner of war Camp 5 in Pyokdong, North Korea. Gantt's remains were not among those repatriated by the Chinese or North Koreans in 1954. In early 2006, a South Korean citizen turned over human remains, which appeared to represent U.S. service members, to U.S. authorities. The remains were taken to the Joint POW/MIA Accounting Command (JPAC) for analysis. In the identification of Gantt, scientists from JPAC and the Armed Forces DNA Identification Laboratory (AFDIL) used circumstantial evidence and forensic identification tools, such as dental comparison and mitochondrial DNA analysis, which matched Gantt's cousins.

World War II

None [Source: http://www.dtic.mil/dpmo/news/news_releases/ Dec 2013 ++]

TFL Pharmacy Benefit Update ► New Maintenance Meds Policy

Military retirees and family members who use Tricare For Life will be required to start filling long-term prescriptions by mail starting Feb. 14, 2014. Under an interim rule published by the government 11 DEC, retirees and family members age 65 and older must begin filling their maintenance medication prescriptions by mail when they come up for renewal on or after Valentine's Day next year. The requirement applies to maintenance medications only, not those needed for acute illnesses. It also will not apply to prescriptions covered by other health insurance.

The Defense Department has determined that nearly half the 70 million prescriptions filled for Tricare beneficiaries at retail pharmacies in fiscal 2012

were for Tricare For Life beneficiaries, at a cost of \$2.2 billion to the government. Since DoD pays 17 percent less for maintenance medications filled by mail compared with those filled at retail stores, Pentagon analysts concluded that costs could be trimmed significantly — by at least \$120 million a year — if Tricare for Life beneficiaries were required to use mail order. The requirement also will save beneficiaries money: a 90-day refill of a generic medication costs nothing by mail, but require a \$5 copayment for a 30-day prescription at retail stores. Brand name drugs cost \$13 for a 90-day prescription by mail but \$17 for a 30-day prescription at a store. Over the next month, Tricare will begin publicizing the pending change. Affected beneficiaries also will receive letters.

Beneficiaries will be able to opt out of the five-year initiative after one year. Their obligation starts when they first fill a prescription through mail order, according to the rule published in the Federal Register. To make up for any delays between ordering refills and receiving them, the new rule will allow beneficiaries to receive up to two 30-day refills at a retail store during the transition. Public Health Service Rear Adm. Thomas McGinnis, the Defense Health Agency's pharmacy operations chief, said recently that Tricare and Express Scripts, Tricare's pharmacy contractor, have established a telephone concierge service to help beneficiaries make the switch. With a patient's permission, Express Scripts will contact the prescribing physician to help transfer the prescription. Express Scripts also will staff its toll-free number to serve customers as well as pharmacists and physicians. Case-by-case waivers may be granted out of personal hardship, emergency or "other special circumstance," according to the rule. Waiver requests would have to be made through Express Scripts.

A congressional budget analysis conducted in May 2012 said the program likely would save \$150 million a year, and it estimates that from 2013 to 2022, total savings from the proposal would be \$1.1 billion. A 2012 Military Officers Association of America survey of 130,000 members found that more than 92 percent of those who tried the mail-order system report being "very satisfied" or "mostly satisfied" with it. Retired Lt. Cmdr. Steve Tennison, of Pampa, Texas, who uses Tricare Standard, said his family recently received a phone call from Express Scripts offering to switch their maintenance medications to the mail order pharmacy. He described the process as "painless" and said his medications now arrive roughly every 60 days by mail, for free. "We just talked to them on the phone and a few weeks later, the postman delivered a big plastic bag of

medicine,” Tennison said. Refills can be ordered by calling 1-877-363-1303 or by going online at <http://www.express-scripts.com/TRICARE>. Tricare beneficiaries, including Medicare-eligible ones on Tricare for Life, also can fill prescriptions and receive refills at no cost at military treatment facilities. [Source: MilitaryTimes | Patricia Kime | 12 Dec 2013 ++]

VA Surgical Implants: Purchase Requirements Were Not Always Followed at Selected Medical Centers and Oversight Needs Improvement

What GAO Found

Clinicians at the four Department of Veterans Affairs Medical Centers (VAMC) GAO visited said that patient need and their clinical expertise were the main factors influencing their decisions of which surgical implants to use. Also, clinicians in certain specialties said they typically used one of the implants available on VA-negotiated national committed-use contracts, which generally establish a fixed price for several models of nine types of surgical implants that the Veterans Health Administration (VHA) commits to using nationally. VHA recognizes the need for expanding items covered under these contracts to fully leverage its purchasing power but, as of October 2013, had not identified additional implants to include on such contracts or established timelines for doing so. GAO also found that the availability of implants on VA-negotiated federal supply schedule (FSS) contracts rarely influenced clinicians' decisions on which implant to use. Clinicians were often not aware of the availability of surgical implants on FSS contracts, which are negotiated by one of VA's contracting offices, but for which VHA clinicians have little or no input. Clinicians told GAO that in some cases they may avoid implants on FSS contracts due to their concerns about the quality of these items.

In regard to compliance with VHA's requirements for justifying open-market purchases of surgical implants, which VHA adopted to promote adherence to relevant federal regulations, GAO found the following:

None of the four VAMCs fully complied with requirements for obtaining waivers for open-market purchases of surgical implants because they were focusing on other priorities or lacked awareness of the requirements, among other factors.

None of the four VAMCs fully complied with additional requirements for documenting open-market purchases that are part of a new process VHA implemented in fiscal year 2013 for surgical implant purchases over \$3,000. VAMC and regional office officials attributed noncompliance mainly to insufficient VHA guidance and VA staff's inexperience in completing these requirements. Three of the four VAMCs did not comply with a VHA requirement pertaining to agreements with vendors that provided surgical implants to them on consignment. These agreements, which clinicians likely established to ensure timely access to implants, do not comply with a VHA requirement that consignment agreements must be authorized by a VHA contracting officer. The Department of Veterans Affairs (VA) and VHA have begun conducting oversight of surgical implant purchases over \$3,000 to assess compliance with VHA's new requirements. However, VHA officials told GAO that VA and VHA have not ensured that corrective action has been taken to address identified noncompliance because of poor communication between VA and VHA and insufficient staffing to follow up on identified issues. Furthermore, VHA assesses each VAMC's performance on metrics established for surgical implant purchasing, but it does not have a policy governing how any identified deficiencies should be addressed nor the corrective actions to be taken by VAMCs and VHA's regional networks.

Why GAO Did This Study

VHA spending on surgical implants--such as stents and bone and skin grafts--has increased to about \$563 million in fiscal year 2012. Clinicians at VAMCs determine veterans' needs and request implant purchases either from a contract or from the open market (i.e., not from an existing contract). VHA requirements--which implement relevant federal regulations--include providing justifications for open-market purchases.

GAO was asked to evaluate implant purchasing by VHA. This report examines (1) factors that influence clinicians' decisions to use particular implants when multiple, similar items are available; (2) selected VAMCs' compliance with pertinent VHA requirements for documenting open-market purchases; and (3) VA's and VHA's oversight of VAMC compliance with implant purchasing requirements. GAO visited four VAMCs that serve large veteran populations and are dispersed geographically. GAO interviewed clinicians at the VAMCs, reviewed pertinent statutes, regulations, and policies and reviewed a sample of implant

purchases from different vendors. These results cannot be generalized to all VAMCs but provide insights. GAO also interviewed VA and VHA officials and reviewed agency documents.

What GAO Recommends

GAO recommends that VA identify implants and establish a timeline to expand the volume that can be purchased from VA-negotiated contracts and improve compliance with and oversight of purchasing requirements. VA concurred with these recommendations.

Recommendations for Executive Action

Recommendation: To expand the volume of surgical implants purchased from existing, higher-priority contracts and to improve compliance and oversight related to purchasing requirements, the Secretary of the Department of Veterans Affairs should create a plan that includes timelines for evaluating the benefits of developing additional national committed-use contracts for surgical implants and establishing these contracts.

Agency Affected: Department of Veterans Affairs

Status: Open

Recommendation: To expand the volume of surgical implants purchased from existing, higher-priority contracts and to improve compliance and oversight related to purchasing requirements, the Secretary of the Department of Veterans Affairs should explore options to increase clinicians' awareness of high quality surgical implants available on FSS contracts, including developing a user-friendly list for VAMC clinicians of surgical implants available on FSS contracts for each surgical specialty.

Agency Affected: Department of Veterans Affairs

Status: Open

Recommendation: To expand the volume of surgical implants purchased from existing, higher-priority contracts and to improve compliance and oversight related to purchasing requirements, the Secretary of the Department of Veterans Affairs should re-emphasize to VAMCs that waivers must be completed for open-market purchases of surgical implants, provide clear guidance to VAMCs on when

and how to complete these waivers, and establish internal controls to ensure VAMCs' compliance with waiver requirements.

Agency Affected: Department of Veterans Affairs

Status: Open

Recommendation: To expand the volume of surgical implants purchased from existing, higher-priority contracts and to improve compliance and oversight related to purchasing requirements, the Secretary of the Department of Veterans Affairs should provide additional training to VAMCs and network contracting offices (NCOs) on how to properly document open-market purchases of surgical implants over \$3,000, including those awarded on a sole-source basis.

Agency Affected: Department of Veterans Affairs

Status: Open

Recommendation: To expand the volume of surgical implants purchased from existing, higher-priority contracts and to improve compliance and oversight related to purchasing requirements, the Secretary of the Department of Veterans Affairs should enhance information sharing on noncompliance between VA and VHA and revise existing guidelines to require that VAMCs and NCOs document the measures they are taking to address noncompliance and report their progress (via corrective action plans) in achieving those measures through the VHA and VA management chains of command.

Agency Affected: Department of Veterans Affairs

Status: Open

Update from the Office of Congressman John Kline

Congressman Kline was proud to support the FY14 Omnibus Appropriations Act. This legislation passed the House with overwhelming bi-partisan support by a vote of 359-67 yesterday.

The legislation included many critical priorities for veterans and military families. The bill provided \$9.8 billion in military construction funding to rehabilitate and upgrade VA hospitals and provide infrastructure to veterans and their families. The legislation also provided funding to support the more than 4.2 million

veterans and survivors so they can receive disability compensation and participate in educational and job training programs.

The legislation Congressman Kline supported also works to end the back log of VA disability claims currently experienced by many veterans in Minnesota and across the United States. Congressman Kline was proud to support funding in the FY14 Omnibus that passed the House today to fund a major initiative to help VA meet its goal of ending the backlog and providing funding for information technology upgrades, overtime for processors, and additional training to address the backlog.

Providing VA the tools to fix the disability back log and holding the VA accountable has been a priority for Congressman Kline. In April of last year, Congressman Kline co-signed a letter to the President of the United States urging him to take immediate action to ensure the Department of Veterans Affairs fulfills its duty and obligation to those who have served and sacrificed by resolving the VA claims back log.